



Georgia Department of Early Care and Learning

SCHOLARSHIPS & INCENTIVES

PROFESSIONAL DEVELOPMENT PROGRAM IN EARLY CARE AND EDUCATION

SCHOLARSHIPS

Pre-Qualification and Application Form

*"Bright from the Start: Georgia Department of Early Care and Learning is proud to support and encourage Georgia's early care and education professionals through the **SCHOLARSHIPS** & **INCENTIVES** programs. These innovative programs help create a high quality, stable early care and education workforce that benefits families, contributes to the state's economy, and helps prepare Georgia's young children for success in school."*

Bobby D. Cagle, MSW, Commissioner

SCHOLARSHIPS is Georgia's statewide educational assistance program for early care and education professionals pursuing credentials or degrees in early childhood education or child development. **SCHOLARSHIPS** assists approved applicants with tuition and mandatory fees and provides a support stipend directly to them. Approved applicants may enroll in any of Georgia's technical colleges or any public or private institution that is SACS-accredited and HOPE-eligible. **SCHOLARSHIPS** funds several levels of study; applicants may work toward a technical college certificate or diploma, or a two- or four-year degree.

To be eligible:

- ✓ You must be able to document that you are a United States citizen, legal permanent resident, qualified alien or non-immigrant.
- ✓ You must be a teacher, assistant teacher, director or assistant director (all other positions do not qualify) employed with a child care learning center or group day care home that is licensed by Bright from the Start: Georgia Department of Early Care and Learning or the Department of Defense (DOD) **OR** you must work as or be employed with a registered family day care home.
- ✓ You must work with children, ages five or younger, at least 25 hours per week if you are a teacher or assistant teacher **OR** 40 hours per week if you are a director or assistant director.
- ✓ You must earn \$15.00 per hour or less.
- ✓ You must submit your Georgia Professional Development Registry (PDR) Profile. See instructions on page seven.
- ✓ Applicants for the CDA Assessment Fee or technical college certificate programs must have been employed at least **three consecutive months** with the current employer.
- Applicants seeking a technical college diploma or an associate degree must have been employed at least **six consecutive months** with the current employer.
- Applicants seeking a bachelor's degree must have been employed at least **12 consecutive months** with the current employer.
- ✓ You must be accepted into a formal early childhood education program of study leading to the award of a credential or degree at an eligible institution.

Applications for **SCHOLARSHIPS are accepted throughout the year, but we ask that you apply no earlier than 60 days prior to the term you plan to attend. For additional information, contact the **SCHOLARSHIPS** and **INCENTIVES** office at 800-227-3410 or 770-642-6722.**

Bright from the Start SCHOLARSHIPS

PROGRAMS OF STUDY	INSTITUTION ELIGIBILITY	AWARDS	AS A RECIPIENT YOU ARE EXPECTED TO:
Technical Certificate of Credit (TCC) (Must have been employed with current employer or be a registered family day care provider for three months)	Any of Georgia's technical colleges offering a certificate in Early Childhood Education, Child Development or Child Care Administration	Tuition Payment – 80% of tuition and mandatory fees not covered by the HOPE grant Support Stipend of \$300 each semester	<ul style="list-style-type: none"> • Notify the SCHOLARSHIPS office immediately of any changes in schedule or of a decision to withdraw • Attend all classes and complete all assignments • Submit grades at the end of each term • Maintain a minimum overall GPA of 2.0
Technical College Diploma (TCD) (Must have been employed with current employer or be a registered family day care provider for six months)	Any of Georgia's technical colleges offering a diploma in Early Childhood Education, Child Development or Child Care Administration	Tuition Payment – 80% of tuition and mandatory fees not covered by the HOPE or Pell grant Support Stipend of \$300 each semester	<ul style="list-style-type: none"> • Notify the SCHOLARSHIPS office immediately of any changes in schedule or of a decision to withdraw • Attend all classes and complete all assignments • Submit grades at the end of each term • Maintain a minimum overall GPA of 2.0
Associate Degree (Must have been employed with current employer or be a registered family day care provider for six months)	Any of Georgia's technical colleges, or any SACS – accredited, HOPE-eligible, public or private institution offering a two-year degree in Early Childhood, Child Development or Child Care Administration	Tuition Payment – 80% of tuition and mandatory fees not covered by the HOPE scholarship or Pell grant at Georgia public institutions or up to \$1,800 per semester at private institutions Support stipend of \$225 each quarter or \$300 each semester	<ul style="list-style-type: none"> • Notify the SCHOLARSHIPS office immediately of any changes in schedule or of a decision to withdraw • Attend all classes and complete all assignments • Submit grades at the end of each term • Maintain a minimum overall GPA of 2.0
Bachelor's Degree (Must have been employed with current employer or be a registered family day care provider for 12 months)	Any SACS-accredited, public or private, HOPE-eligible institution offering a four-year degree in Early Childhood, Child Development or Child Care Administration	Tuition Payment – 80% of tuition and mandatory fees not covered by the HOPE scholarship or Pell grant at Georgia public institutions or up to \$1,800 per semester at private institutions Support stipend of \$225 each quarter or \$300 each semester	<ul style="list-style-type: none"> • Notify the SCHOLARSHIPS office immediately of any changes in schedule or of a decision to withdraw • Attend all classes and complete all assignments • Submit grades at the end of each term • Maintain a minimum overall GPA of 2.5
CDA Assessment Fee Scholarship Only (Must have been employed with current employer or be a registered family day care provider for three months)	Any of Georgia's technical colleges, any SACS-accredited HOPE-eligible institution with an ECE department, or any CDA course approved through the Georgia ECE Training Approval System www.training.dec.state.ga.us	100% of cost: 85% sent directly to Council for Professional Recognition and 15% reimbursed to you when you submit a copy of your CDA and continue to meet eligibility requirements For CDA's awarded after June 30, 2012: Support stipend of \$100 when you submit a copy of your updated, active status, Career Level 4 PDR Profile reflecting the award date of your CDA	<ul style="list-style-type: none"> • Submit your Direct Assessment Application to the Council for Professional Recognition immediately upon receipt of your award letter from SCHOLARSHIPS

You must contact the **SCHOLARSHIPS office and submit copies of your grades upon completing a term and your schedule of classes for the next term in order to continue.**

STEP 1: Personal Information (Please print):

Name: _____ County of Residence: _____
First-middle initial-last (as it appears on your social security card)

Home Address: _____ Apartment Number: _____
Street or post office box (Enter only one)

City: _____ State: _____ Zip: _____

Home Phone: () _____ Cell Phone: () _____ Date of Birth: ____/____/____

Social Security Number: ____/____/____ E-mail: _____

Gender:	Race:	Ethnicity: (any race)	Georgia Professional Development Registry Number:
<input type="checkbox"/> Female <input type="checkbox"/> Male	<input type="checkbox"/> White <input type="checkbox"/> Black / African-American <input type="checkbox"/> Asian <input type="checkbox"/> Native American / Alaskan Native <input type="checkbox"/> Native Hawaiian / Pacific Islander <input type="checkbox"/> Bi- / Multi-Racial <input type="checkbox"/> Other: _____	<input type="checkbox"/> Hispanic / Latino <input type="checkbox"/> Not Hispanic / Latino	_____ <small>(Payment will not be issued without a copy of your PDR Profile reflecting your PDR number.)</small>

STEP 2: Employment Information (Employer must complete, sign, and date):

Name of center, group home or family day care home: _____
Enter name as it appears on Bright from the Start license/registration

Work Address: _____ County: _____
Enter address as it appears on Bright from the Start license/registration

City: _____ State: _____ Zip: _____

Phone: () _____ Fax: () _____

Facility type (check one):

- ☐ Child Care Learning Center
☐ Group Day Care Home
☐ Family Day Care Home

Home or center is licensed by (check one):

- ☐ Bright from the Start (BFTS)
☐ Department of Defense (DOD)

Family Day Care Homes Only

Date you opened your family day care home: ____/____/____

Number of hours your family day care home operates each week: _____

Number of children currently enrolled in your family day care home: _____

Ages of children currently enrolled (circle all that apply):

Birth – 1 1 2 3 4 5

Your Net Income from previous year's IRS Schedule C tax form:

\$ _____

Child and Adult Care Food Program (CACFP)?

☐ Yes ☐ No

Serve DFCS subsidized children?

☐ Yes ☐ No

Child Care Learning Centers and Group Day Care Homes Only

Applicant's Job Title (mark all that apply):

☐ Asst. Teacher ☐ Asst. Director ☐ Owner

☐ Teacher ☐ Director (other positions do not qualify)

Is the applicant a Georgia lottery-funded Pre-K teacher? ☐ Yes ☐ No

Is the applicant a Head Start or Early Head Start teacher? ☐ Yes ☐ No

Number of hours applicant works each week: _____

Number of months per year applicant works (circle one): 9 10 12

Number of months per year applicant is paid (circle one): 9 10 12

Applicant's current hourly wage: \$ _____

Applicant is paid: Weekly Bi-Weekly Bi-Monthly Monthly (circle one)

Applicant's date of hire: ____/____/____ (use original hire date if employment has been continuous with present employer, but at different locations)

If applicant is in the classroom, # of children in applicant's classroom: _____

If applicant is in the classroom, ages of children in class (circle all that apply):

Birth – 1 1 2 3 4 5

As **Owner, Director or Human Resources Manager**, I verify that the above employment information for this applicant is true and accurate. I understand and agree that receipt of **SCHOLARSHIPS** monies by the applicant will not affect any salary adjustments the applicant may be eligible to receive through our program.

Name (print): _____ Title (print): _____

Signature: _____ Date: _____

APPLICANTS MUST COMPLETE THIS SECTION

SCHOLARSHIPS provides tuition assistance to eligible employees of early care and education centers and family day care providers who wish to earn a credential or degree in early childhood education, child development or child care administration.

STEP 3: What are your education plans?

The chart in this application describes the features of the Bright from the Start **SCHOLARSHIPS** program, including eligible early childhood education programs of study, the maximum amount of each award, and the requirements you must meet to remain in the program.

Select the early childhood education credential or degree you wish to earn:

- ☐ TCC – Technical Certificate of Credit ☐ TCD – Technical College Diploma ☐ Associate Degree ☐ Bachelor's Degree
- Name of institution you attend/will attend: _____
- What is the first term/year you wish to be considered for **SCHOLARSHIPS** (Example – Spring 2013): _____

☐ I wish to apply for **the CDA Assessment Fee only**.

Name of State-approved 120 clock-hour CDA training instructor: _____

Or

Name of College/University from which you earned academic credit in early care and education courses: _____

My Direct Assessment Application to the Council ☐ has been submitted online ☐ a paper copy will be mailed to the Council

STEP 4: List all credentials and/or degrees you have previously earned:

<u>Credential/Degree Earned:</u>	<u>Institution</u>	<u>Program of Study</u>	<u>Year Earned</u>
<input type="checkbox"/> Child Development Associate	_____	_____	_____
<input type="checkbox"/> Technical Certificate of Credit	_____	_____	_____
<input type="checkbox"/> Technical College Diploma	_____	_____	_____
<input type="checkbox"/> Associate Degree	_____	_____	_____
<input type="checkbox"/> Bachelor's Degree	_____	_____	_____
<input type="checkbox"/> Master's Degree	_____	_____	_____

STEP 5: Have you applied for state and/or federal financial aid?

All applicants except those applying for the CDA Assessment Fee are required to apply for financial aid. You must apply for the HOPE grant or scholarship and/or the federal Pell grant. If you are approved for one form of financial aid and the award covers tuition and mandatory fees, you are not required to apply to another source of aid. The Financial Aid Office of the institution you selected can assist you in this process. You may still submit your application to **SCHOLARSHIPS**, but you must present documentation you have applied for financial aid before approval can be made. **Receiving financial aid does not disqualify you from the program. If **SCHOLARSHIPS** does not assist you with tuition payments, you may still be eligible for the support stipend provided to students each term they are enrolled.**

☐ Yes, I have applied, and I am awaiting a response regarding financial aid. Submit a copy of the response letter upon receipt.

☐ Yes, I applied and was informed that:

☐ I am not eligible for HOPE or Pell. Submit proof of your denial.

☐ I am eligible for:

<input type="checkbox"/> HOPE	Amount: \$ _____	Submit proof of your award
<input type="checkbox"/> Pell	Amount: \$ _____	Submit proof of your award
<input type="checkbox"/> Other	Amount: \$ _____	Submit proof of your award

STEP 6: Affidavit for Lawful Presence Verification:

**Affidavit For Lawful Presence Verification
For
Bright from the Start: Georgia Department of Early Care and Learning
SCHOLARSHIPS**

By executing this affidavit under oath, as an applicant for a SCHOLARSHIPS payment or for other public benefit as referenced in O.C.G.A. §50-36-1(a)(3)(A), I hereby swear and affirm that the following is true and correct with respect to my application for a SCHOLARSHIPS payment from Bright from the Start: Georgia Department of Early Care and Learning.

Name of Person Receiving Benefit: _____

Check one of the following:

- 1) _____ I am a United States citizen 18 years of age or older.
- 2) _____ I am a legal permanent resident of the United States, 18 years of age or older.
- 3) _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, 18 years of age or older, with an alien registration number issued by the Department of Homeland Security or other federal immigration agency

My alien registration number issued by the Department of Homeland Security or other federal immigration agency is: _____ **(Required if #2 or #3 is checked).**

I also verify I am providing **A COPY OF THE FRONT AND BACK** of at least one secure and verifiable document, as required by O.C.G.A. Sec. 50-36-1(e)(1), with this affidavit. **A complete list of acceptable documents is on page 8 of this application.**

The secure and verifiable document I am providing with this affidavit is:

(Identify the document, such as driver's license, Temporary Resident Card, passport, etc.)

In providing the above information under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit in any matter within the jurisdiction of any department or agency of state government shall be guilty of a violation of O.C.G.A. §16-10-20 and face criminal penalties as allowed by such criminal statute.

Signature of Applicant

Date

Printed Name:

Printed Address:

Mailing Address

City

State

Zip

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
____ DAY OF _____, 20____

Notary Public

My Commission Expires: ____/____, 20____

STEP 7: Attach the following documents to your SCHOLARSHIPS application:

<p>Attending a Georgia HOPE-Eligible College or University</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Copy of two recent pay stubs reflecting the name of your employer, your name, and your gross (before deductions) wages. Family day care providers and owners who do not pay themselves W2 wages submit a copy of last year's Schedule C or other federal tax form documenting net business income. <input type="checkbox"/> Copy of award/denial letter from HOPE and/or Pell ___Enclosed ___Will submit <input type="checkbox"/> Schedule of classes if currently enrolled <input type="checkbox"/> Copy of your Professional Development Registry Profile reflecting your PDR number <input type="checkbox"/> Copy of a secure and verifiable document (see page eight for information)
<p>CDA Assessment Fee</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Copy of two recent pay stubs reflecting the name of your employer, your name, and your gross (before deductions) wages. Family day care providers and owners who do not pay themselves W2 wages submit a copy of last year's Schedule C or other federal tax form documenting net business income. <input type="checkbox"/> Copy of your certificate documenting 120 clock-hours (or TCC transcript) <input type="checkbox"/> Copy of your completed Direct Assessment Application (do not send original white or yellow copy) or print-out from online Council registration <input type="checkbox"/> Copy of your Professional Development Registry Profile reflecting your PDR number <input type="checkbox"/> Copy of a secure and verifiable document (see page eight for information)

STEP 8: Sign and date the application:

STATEMENT OF AFFIRMATION: Read carefully before signing and dating. Unsigned applications will not be processed.

I _____ (*Applicant's Name*), attest that all of the information appearing on this application and in supporting documentation is true to the best of my knowledge. I understand that any false or incomplete information knowingly provided on this application or in supporting documents may be grounds for denial of this application and denial of future participation in this or other programs. I understand that intentionally providing false information on this application or in supporting documents is a violation of state law and may result in civil or criminal proceedings. I authorize any agent or employee of Bright from the Start: Georgia Department of Early Care and Learning to verify this information and release it to any necessary party to determine my eligibility.

I also understand and agree that my personal information may be shared with the Georgia Early Care and Education Professional Development Registry.

Applicant's Signature

Date

STEP 9: Detach pages three through six and mail to:

SCHOLARSHIPS & INCENTIVES Programs

c/o Care Solutions, Inc.

1117 Perimeter Center West, Suite W-300

Atlanta, GA 30338

If you have already earned an Early Childhood Education degree or credential, you may be eligible for **INCENTIVES**.

For questions on **SCHOLARSHIPS** or **INCENTIVES**, call 800-227-3410 or 770-642-6722.

www.caresolutions.com



SCHOLARSHIPS & INCENTIVES are managed by Care Solutions, Inc.

SCHOLARSHIPS is funded by Bright from the Start: Georgia Department of Early Care and Learning through the federal Child Care and Development Fund.

All individuals applying for the **SCHOLARSHIPS** program must register with the Georgia Early Care and Education Professional Development Registry (PDR) as a part of the application process. The PDR is separate from SCHOLARSHIPS and INCENTIVES. It records and maintains your professional development information – your training and/or any credentials or degrees you earn, in one convenient location.

Registering is easy! You can sign up immediately even if you have not earned a credential or degree by entering any recent early childhood or related training you have received up to the established time frame.

1. Gather your relevant training certificates, credentials, and/or transcript(s).
2. Go to <https://pdr.dec.state.ga.us>.
3. Follow the directions to create your confidential account. Be sure to record your username and password and secure them for future use.
4. After completing and saving the **Contact, Education, and Employment and Training** sections, scroll to the bottom of the page and look for the message **'Ready for Submission? Return to My Profile to submit.'** Click there.
5. Scroll to the bottom and check the box next to **'I have reviewed.'** Click on the **Continue** button, check the box next to **'I authorize'** then click **'Submit'** to send your profile for review. This action will change your PDR status from **Incomplete** to **Pending** and you will be assigned a PDR Number.
6. **Print your PDR Profile** to submit with your **SCHOLARSHIPS** or **INCENTIVES** application.
7. You will receive an email identifying what you need to submit to the PDR to verify the information you entered. The documents are not shared with the **SCHOLARSHIPS** and **INCENTIVES** programs.

Two other tabs appear when you enter the system to view your profile: Other Career Data and Demographics. Completing the information under these tabs is voluntary; this data is used by Bright from the Start to determine additional supports and services needed across the state. If you have participated in **SCHOLARSHIPS**, **INCENTIVES**, or other programs, check the appropriate box.

You can update your profile at any time by submitting documentation of state-approved trainings, credentials, degrees, conference attendance, etc. as you complete them.

The PDR is a tool that benefits the early care and education community in Georgia, and we encourage you to take advantage of this opportunity. Thank you for your continued dedication to your professional development and your commitment to improving the quality of care for young children.

If you have questions or need technical support, contact the PDR at 866-258-7737 or e-mail pdrsupport@dec.state.ga.us.

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2

Issued August 1, 2012 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 ("IIREA") provides that "[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law's website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General." O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

- **A United States passport or passport card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A United States military identification card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A driver's license** issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the United States Virgin Islands, American Samoa, or the Swain Islands, providing that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An identification card** issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the United States Virgin Islands, American Samoa, or the Swain Islands, providing that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A tribal identification card** of a federally recognized Native American tribe, provided it contains a photograph of the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at: <http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A United States Permanent Resident Card or Alien Registration Receipt Card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An Employment Authorization Document** that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A passport issued by a foreign government** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A Merchant Mariner Document or Merchant Mariner Credential** issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A Free and secure Trade (FAST) card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A NEXUS card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A driver's license issued by a Canadian government authority** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A Certificate of Citizenship** issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A Certificate of Naturalization** issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **Certification of Report of Birth** issued by the United States Department of State (Form DS-1350) [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **Certification of Birth Abroad** issued by the United States Department of State (Form FS-240) [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **Consular Report of Birth Abroad** issued by the United States Department of State (Form FS-240) [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An original or certified copy of a birth certificate** issued by a State, county, municipal authority, or territory of the United States bearing an official seal [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]

If you have any questions, call toll free 800-227-3410 or 770-642-6722.

www.caresolutions.com



SCHOLARSHIPS & INCENTIVES are managed by Care Solutions, Inc.